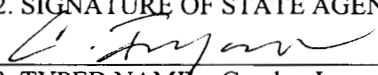
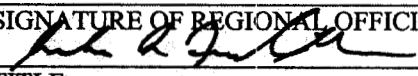


<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>		1. TRANSMITTAL NUMBER: 04-005	2. STATE NEW MEXICO
<b>FOR: HEALTH CARE FINANCING ADMINISTRATION</b>		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
<b>TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>		4. PROPOSED EFFECTIVE DATE December 1, 2004	
5. TYPE OF PLAN MATERIAL (Check One):  <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: Section 1902 (r)(2) of the Social Security Act		7. FEDERAL BUDGET IMPACT: a. FFY 2005      \$ 10,000.00 b. FFY 2006      \$ 100,000.00	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: ATTACHMENT 2.6-A Page 7  Supplement 8a to ATTACHMENT 2.6 -A Page 3 <i>* Supplement 12 to Attachment 2.6-A Page 1 + 2</i> <i>* Supplement 12 to Attachment 2.6-A Page 3</i>		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): ATTACHMENT 2.6 - A, Page 7  Supplement 8a to ATTACHMENT 2.6 - A, Page 3 <i>Supplement 12 to Attachment 2.6A page 1 + 2 TN 00-02</i> <i>New</i>	
10. SUBJECT OF AMENDMENT: More liberal income methodology for Section 1931 Children between the ages of 18 and 19 years.			
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> OTHER, AS SPECIFIED: <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED      Medicaid Director <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO: Carolyn Ingram, Director 2025 S. Pacheco St P.O. Box 2348 -ARK Santa Fe, NM 87504-2348	
13. TYPED NAME: Carolyn Ingram			
14. TITLE: Medical Assistance Division Director			
15. DATE SUBMITTED:			
<b>FOR REGIONAL OFFICE USE ONLY</b>			
17. DATE RECEIVED: 15 JUNE 2004		18. DATE APPROVED: 10 SEPTEMBER 2004	
<b>PLAN APPROVED - ONE COPY ATTACHED</b>			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 1 DECEMBER 2004		20. SIGNATURE OF REGIONAL OFFICIAL: 	
21. TYPED NAME: ANDREW A. FREDRICKSON		22. TITLE: ASSOCIATE REGIONAL ADMINISTRATOR DIV OF MEDICAID & CHILDREN'S HEALTH	
23. REMARKS:  <i>* Pen and ink change made per State's Sept. 3, 2004 letter. S/Hed 9/16/04.</i>			

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
1902(r)(2) of the Act	1. <u>Methods of Determining Income</u> a. <u>AFDC-related individuals (except for poverty level related pregnant women, infants, and children).</u> (1) In determining countable income for AFDC-related individuals, the following methods are used: — (a) The methods under the State's approved AFDC plan only; or <u>X</u> (b) The methods under the State's approved AFDC plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A. (2) In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.
1902(e)(6) the Act	(3) Agency continues to treat women eligible under the provisions of sections 1902(a)(10) of the Act as eligible, without regard to any changes in income of the family of which she is a member, for the 60-day period after her pregnancy ends and any remaining days in the month in which the 60th day falls.

TN No: 04-05 Approval Date 9/10/04 Effective Date 12/1/04  
Supersedes  
TN No. 92-04

SUPERSEDES. TN- 92-04

STATE <u>New Mexico</u>	A
DATE REC'D <u>6-15-04</u>	
DATE APPV'D <u>9-10-04</u>	
DATE EFF <u>12-1-04</u>	
HCFA 179 <u>04-05</u>	

Revision: HCFA-PM-91 (BDP)  
AUGUST 1991

SUPPLEMENT 8a TO ATTACHMENT 2.6-A  
Page 3  
OMB NO.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEW MEXICO

MORE LIBERAL METHODS OF TREATING INCOME  
UNDER SECTION 1902(r)(2) OF THE ACT\*

// Section 1902(f) State /X/ Non-Section 1902(f) State

1. For children identified under provisions of 1902 (a)(10)(A)(i)(VI), 1902 (1)(1)(C) of the Act, disregard from the countable income of the assistance unit the difference between 185% of the federal poverty guidelines, as revised annually in the Federal Register, and 133% of the federal poverty guidelines for the size of the assistance unit involved.
2. For children born after September 30, 1983, as described in 1902 (a)(10)(A)(i)(VII), 1902 (1)(1)(D) disregard from the countable income of the assistance unit the difference between 185% of the federal poverty guidelines, as revised annually in the Federal Register, and 100% of the federal poverty guidelines for the size of the assistance unit involved.
3. For dependent children identified under provisions of 1902(a)(10)(A)(i)(VI) 1902(1)(1)(C), and children born after September 30, 1983, as described in 1902(a)(10)(A)(i)(VII) and 1902(1)(1)(D), the state will disregard all earned income from the countable income calculations.

\*More liberal methods may not result in exceeding gross income limitations under section 1903(f).

TN No. 04-05  
Supersedes  
TN No. 95-03

Approval Date 9/10/04 Effective Date 12/1/04  
HCFA ID: 7985E

SUPERSEDES: TN- 95-03

STATE <u>NEW MEXICO</u>	A
DATE REC'D <u>6-15-04</u>	
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DATE EFF <u>12-1-04</u>	
HCFA 179 <u>04-05</u>	

Revision:

SUPPLEMENT 12 TO ATTACHMENT 2.6-A  
Page 1

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEW MEXICO

ELIGIBILITY—UNDER SECTION 1931 OF THE ACT

The state covers low-income families and children under section 1931 of the Act.

The following groups were included in the AFDC State Plan effective July 16, 1996:

- ☒ Pregnant women with no other children.
- ☒ AFDC children age 18 who are full-time students in a secondary school or the equivalent level of vocational or technical training.
- ☐ In determining eligibility for Medicaid, the agency uses the AFDC standards and methodologies in effect as of July 16, 1996 without modification.
- ☒ In determining eligibility for Medicaid, the agency uses the AFDC standards and methodologies in effect as of July 16, 1996 with the following modifications:
  - ☐ The agency applies lower income standards, which are no lower than the AFDC standards in effect on May 1, 1988, as follows:
  - ☐ The agency applies higher income standards than those in effect as of July 16, 1996, increased by no more than the percentage increases in the CPI-U since July 16, 1996, as follows:
  - ☐ The agency applies higher resource standards than those in effect as of July 16, 1996, increased by no more than the percentage increases in the CPI-U since July 16, 1996, as follows:

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HCFA 179 <u>04-05</u>	

TN No. 04-05

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TN No. 00-02

Approval Date 9/10/04

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:

ELIGIBILITY—UNDER SECTION 1931 OF THE ACT

(Continued)

X The agency uses less restrictive income and/or resource methodologies than those in effect as of July 16, 1996, as follows:

- The first \$120 and 1/3 of the remainder is deducted from the earned income of each household member, with no time limits on the deductions.
- Resource determination methodology allows for exclusion of all resources.
- For purposes of determining countable income, the state disregards all of the earned income of all dependent children.

X The income and/or resource methodologies that the less restrictive methodologies replace are as follows:

- Earned income disregards are the first \$90 and an additional \$30 and 1/3 of the remainder, if certain criteria are met, for a time-limited period of time.
- Excludable resources include the first \$1,500 liquid resources, \$2,000 in non-liquid resources, and total value of at least one vehicle, and in some parts of the state additional vehicles.

TN No. 04-05

Supersedes

TN No. 00-02

Approval Date 9/10/04 Effective Date 12/1/04

SUPERSEDES: TN- 00-02

STATE <u>New Mexico</u>	A
DATE REC'D <u>6-15-04</u>	
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:

ELIGIBILITY—UNDER SECTION 1931 OF THE ACT

(Continued)

X The agency terminates medical assistance (except for certain pregnant women and children) for individuals who fail to meet TANF work requirements.

- All earned income is excluded in the second or third month for two months starting with the month a family exceeds 1931 income standards. This will allow Transitional Medicaid coverage for any family who loses eligibility for 1931 Medicaid due to earnings, and will give the family the necessary twelve months of post 1931 eligibility Transitional Medicaid coverage.

X The agency continues to apply the following waivers of provisions of part A of title IV in effect as of July 16, 1996, or submitted prior to August 22, 1996 and approved by the Secretary on or before July 1, 1997.

Waiver of 402(a)(41) is as follows:

- The 100 hour rule for unemployed parents is waived. Thus, eligibility for 1931 Medicaid may exist regardless of the absence or presence of 'deprivation' criteria.

TN No. 04-05

Supersedes

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Effective Date 12/1/04

~~TN~~ SUPERSEDES: NONE - NEW PAGE

SUPERSEDES: NONE - NEW PAGE

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DATE EFF <u>12-1-04</u>	
HCFA 179 <u>04-05</u>	